

# MCDH EMERGENCY RESPONSE



BOARD OF HEALTH PRESENTATION  
JUNE, 2012

# MCDH EMERGENCY RESPONSE



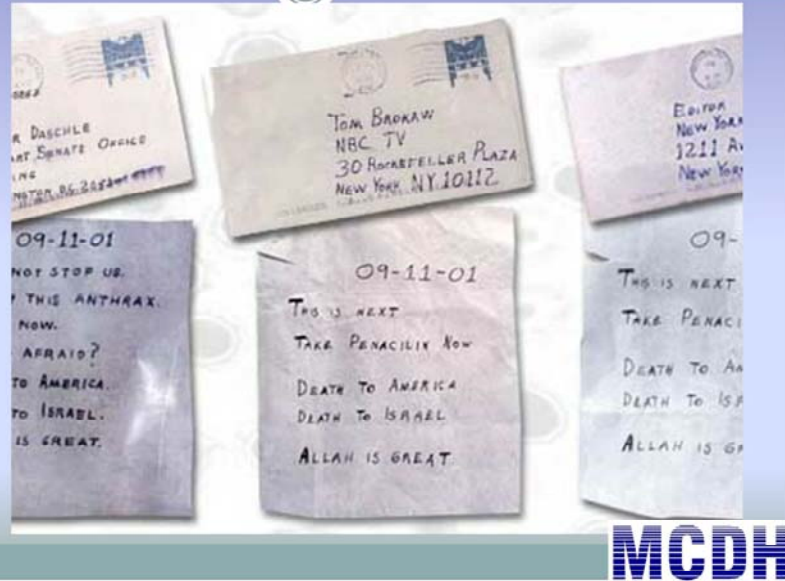
- The beginning
- A few definitions
- MCDH Program Evolution

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## MCDH EMERGENCY RESPONSE

➤9/11  
Attacks

➤Anthrax  
Scare



Public Health has long held a place at the table when it comes to responding to emergencies. Following 9/11 and the Anthrax attacks in the fall of 2001, there was a renewed national awareness across the nation of the importance of a robust public health emergency response ability. In 2002, Federal funding was directed towards enhancing public health preparedness and response efforts. Here in McHenry County, and counties across Illinois, MCDH was able to implement the emergency response program and hire an epidemiologist.

## MCDH EMERGENCY RESPONSE

- Public Health mission statement is mirrored by emergency response
- Decisions are time sensitive  
*In an emergency*
- Events evolve rapidly  
*In an emergency*



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The MCDH mission is to prevent disease and promote health for the residents of McHenry County. Our goal in an emergency is the same. The difference is that in an emergency we do not have the luxury of time. Decisions must be made rapidly with the best – often incomplete and evolving – information available.

## MCDH EMERGENCY RESPONSE

- **PREVENTION**
  - education
- **SURVEILLANCE**
  - Increase in disease
- **INTERVENTION**
  - Medication
  - Non- medical



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To fulfill the public health mission, our tasks in an emergency are the same as those we employ every day. We prevent – by education and planning. We monitor the health of the community by surveillance at schools, hospitals and Dr. offices, watching for upward trends in illness or disease. Through medical and non-medical intervention measures, we attempt to keep people healthy.

## MCDH EMERGENCY RESPONSE



### ***Some Definitions...***

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## MCDH EMERGENCY RESPONSE

# SNS

*Strategic National Stockpile*



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The SNS (Strategic National Stockpile) is a federal repository of pharmaceutical and medical supplies that are needed in a disaster. These supplies are deployed at strategically located warehouses throughout the country. If a state requests SNS supplies during a catastrophic event, whether it is a natural disaster or an act of bioterrorism, supplies can reach the affected area within 12 hours.

# MCDH EMERGENCY RESPONSE

## POD

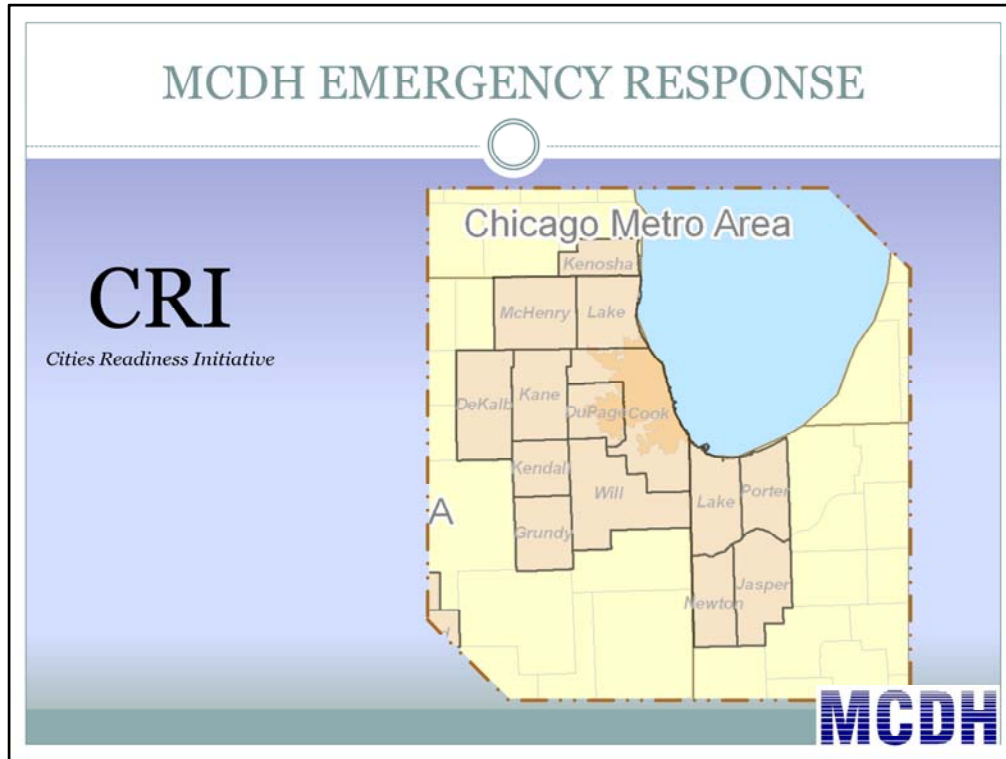
*Point of Dispensing*



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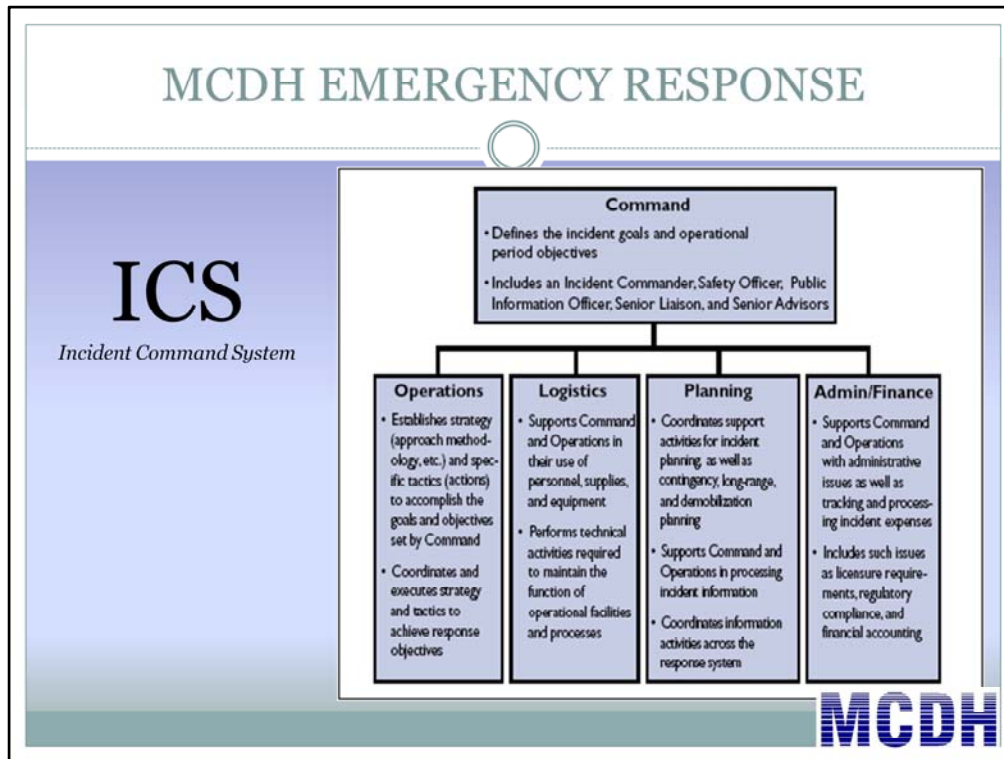
Point of Dispensing is the widely accepted name used to refer to clinics that dispense SNS preventive medication to members of the public.





We all know that public health emergencies do not respect jurisdictional boundaries. The CRI program allows us the opportunity to work closely with our public health colleagues across the region, planning and exercising a coordinated response. The CRI is a federal program designed and funded by the CDC. The intent is to help metropolitan areas prepare for responding to an Anthrax attack in a 48-hour period, with the goal of providing preventive medication to 100% of the jurisdictional population in that 48-hour window. This program has grown from the original 12 CRI jurisdictions –which included the Chicago region – to cover 72 CRI jurisdictions covering 57 % of the nation’s population.

Because of our proximity to Chicago, we are part of the Chicago CRI along with the collar counties in IL, WI and IN.



The Incident Command System (ICS) is a standardized all-hazards incident management approach used by all disciplines that prepare for and respond to emergencies. The system provides common terminology, a common organizational structure and is flexible, allowing the system to be used for incidents of any type, scope and complexity. Governmental organizations that accept federal funding for emergency preparedness and response are required to adopt the ICS structure for responding to emergencies.

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The **Medical Reserve Corps** (MRC) is a network of community-based volunteer units whose purpose is to help meet the public health needs of their communities.. The MRC consists of medical and non-medical volunteers who contribute to local health initiatives, such as activities meeting the Surgeon General's priorities for public health, and supplement existing response capabilities in time of emergency. The MRC is a federal program administered by the Office of the Surgeon General.

## MCDH EMERGENCY RESPONSE



### ***Program Evolution and Our Partners...***

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## MCDH EMERGENCY RESPONSE



Ten years ago, the Anthrax letters and the threat of bioterrorism were on everyone's mind and the focus of public health emergency response was on preparing for this possibility.

## MCDH EMERGENCY RESPONSE



### Planning and Exercise Partners:

- Emergency Management
- EMS/Fire
- Law Enforcement
- Schools
- McHenry County Crisis Line
- Ham Radio Operators
- Department of Transportation
- Hospitals

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In the beginning, our plans emphasized ensuring that McHenry County was prepared to dispense medications from the SNS to residents of McHenry County. Very early on we realized that the task of providing medication to approximately 300,000 people was a collaborative effort that would take a lot of assistance from emergency response agencies throughout the county.

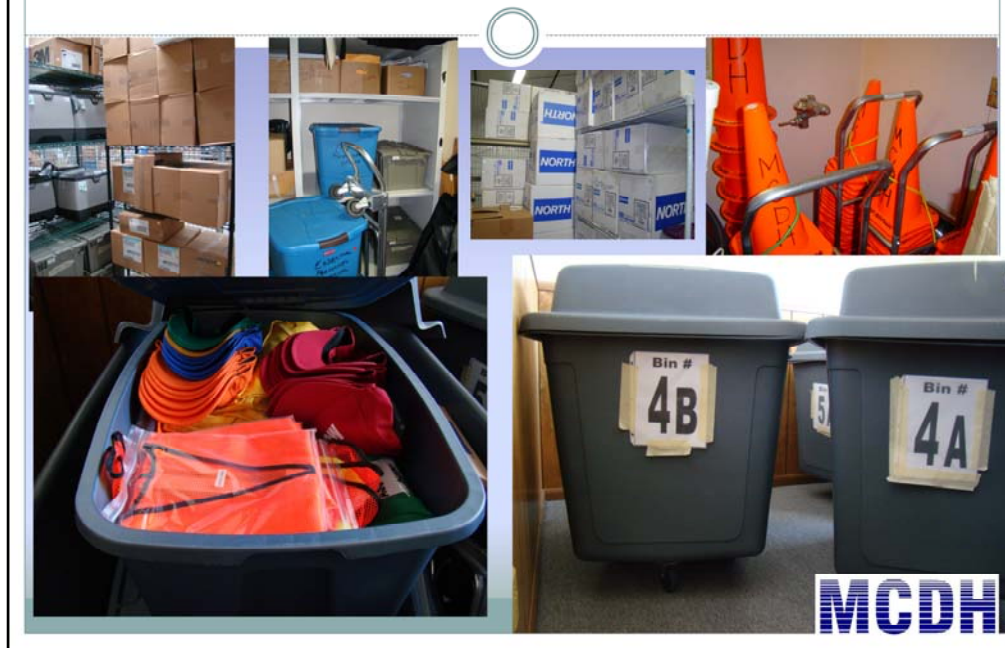
## MCDH EMERGENCY RESPONSE



Our partners throughout the county –some of whom were listed on the previous slide and are seen here - were ready to help us accomplish this. From the ground floor, our planning and exercise partners included emergency management, law enforcement, the Department of Transportation, fire and EMS agencies and both hospital systems in McHenry County. Schools were also on board by opening their doors as points of dispensing, or PODs. (*identify agencies represented in slides*)

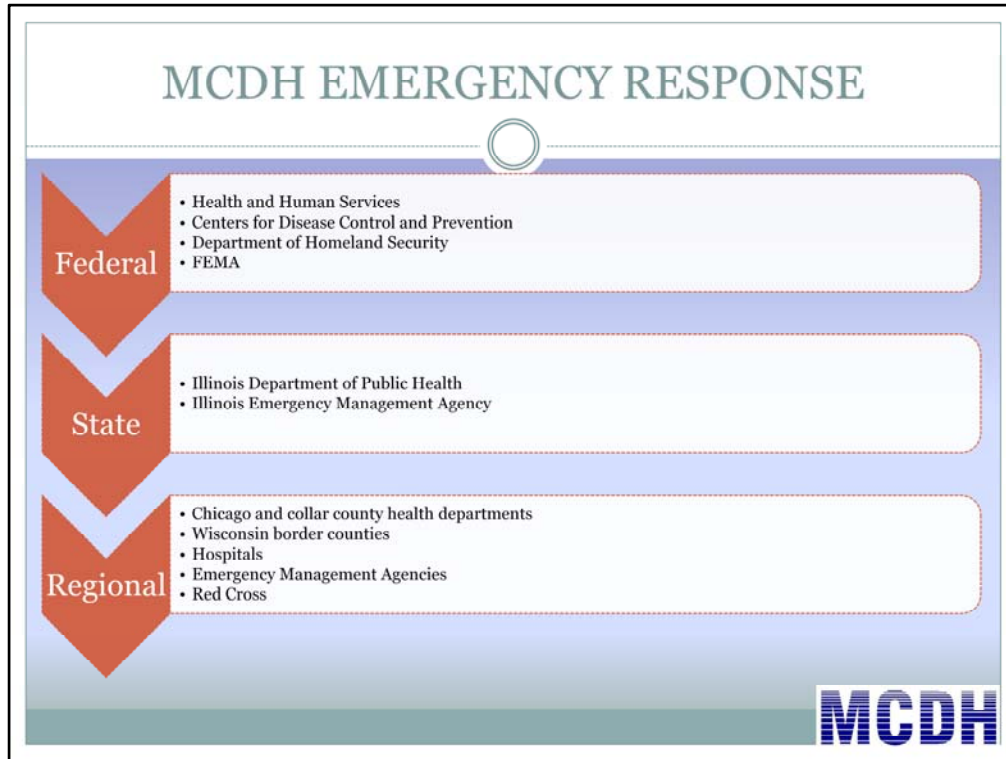


## MCDH EMERGENCY RESPONSE

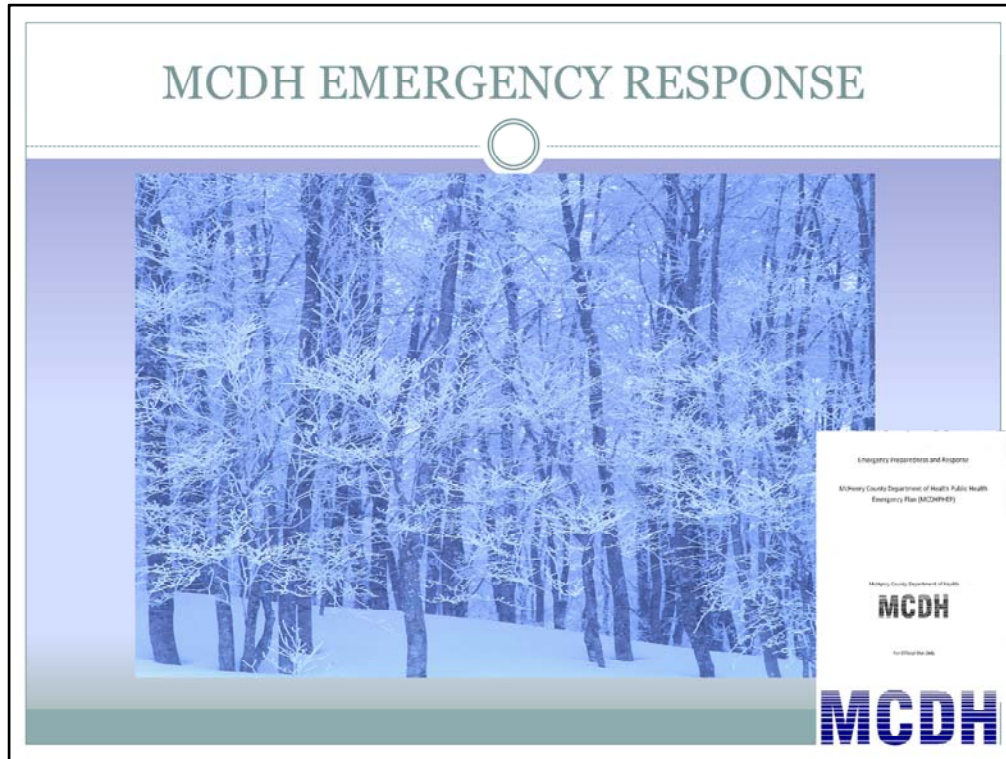


We have plans for 6 large public points of dispensing geographically located throughout the County. Because of the short turn-around time we would have to open a POD, the emergency response program has supplies stored and organized, so we are ready to respond at a moments notice.





In addition to our partners at the local level, we collaborate with partners throughout the Chicagoland CRI region and Illinois. At the federal level, guidance and training come from a number of agencies that plan for disasters – HHS, CDC, DHS and FEMA



Over the last ten years, the scope of the emergency response program at MCDH has broadened. Our focus has shifted from simply preparing for bioterrorism, to an all-hazards approach outlining the MCDH responsibilities in different types of emergencies – from blizzards to power outages to our response to a radiological event. Every time we exercise or every time an incident occurs, we look at what transpired, discuss what went well and where we could improve. From this we develop a corrective action plan and incorporate the lessons we have learned into our plans. This takes place not only within our county, but with our partners in the Chicago CRI planning region, at the State, and at the federal level. Hence, public health emergency response is constantly examining, tweaking, and expanding and becoming more sophisticated in our response. Two years ago we completely overhauled our McHenry County Public Health Emergency Response Plan to reflect this broader vision.

## MCDH EMERGENCY RESPONSE



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It is widely accepted that planning for disasters is never finished. As Dwight D Eisenhower said “Plans are nothing, planning is everything”. I can’t stress enough that the relationships you establish during the planning process are invaluable during times of emergency.



Our response to the H1N1 event several years ago is a great example of this. Due to the way events unfolded, our actions varied from plans we had in place. But the act of planning and the prior relationships we had established were very important. During our response, we met weekly and coordinated our response with both Mercy and Centegra hospital systems. Law enforcement was on hand at every clinic we held. Together with the hospitals, we worked with each school district in the County to make vaccinations available for school children. Various schools and daycares opened their doors when we knocked and hosted community vaccination clinics.

These partners, and the overwhelming response by County Nurses to our mail campaign to recruit volunteer nurses allowed us to provide 13,000 H1N1 vaccinations by MCDH alone.

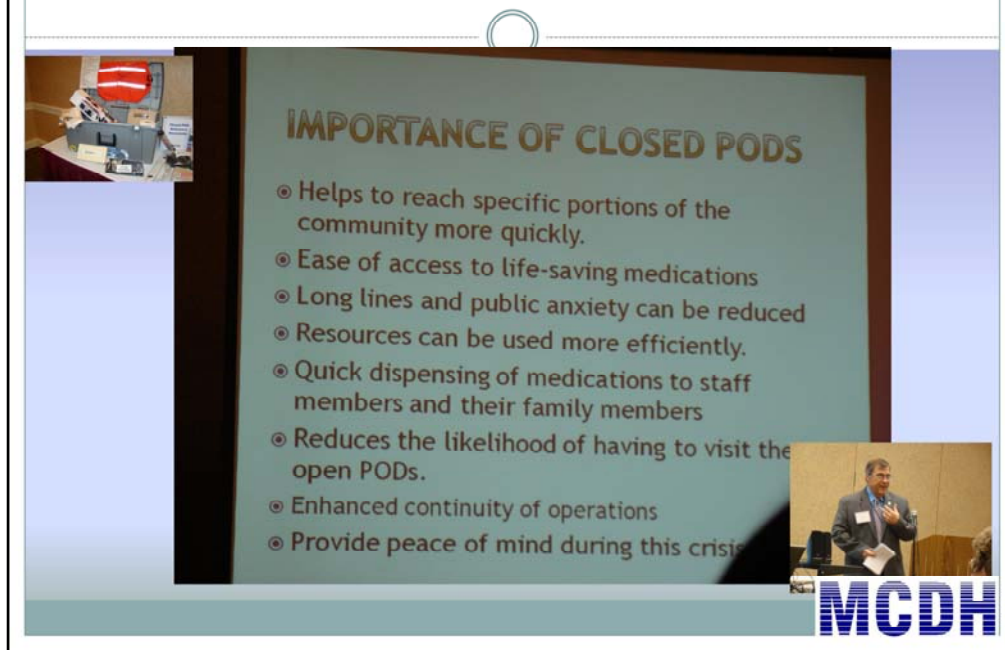


As the program expanded, we reached out to new partners and began working with existing partners in different ways....

Several years ago, the emergency response program provided 23 townships, municipalities and school districts with mini-grants. The goal of this funding was to enable each jurisdiction to put plans in place for responding to public health emergencies and with assistance from the health department, provide education on the topic for their constituents. The city of Crystal Lake and the Village of Lake in the Hills used this funding to develop plans for their own points of dispensing, which are modeled after the larger open PODs throughout the county.



## MCDH EMERGENCY RESPONSE



**IMPORTANCE OF CLOSED PODS**

- Helps to reach specific portions of the community more quickly.
- Ease of access to life-saving medications
- Long lines and public anxiety can be reduced
- Resources can be used more efficiently.
- Quick dispensing of medications to staff members and their family members
- Reduces the likelihood of having to visit the open PODs.
- Enhanced continuity of operations
- Provide peace of mind during this crisis

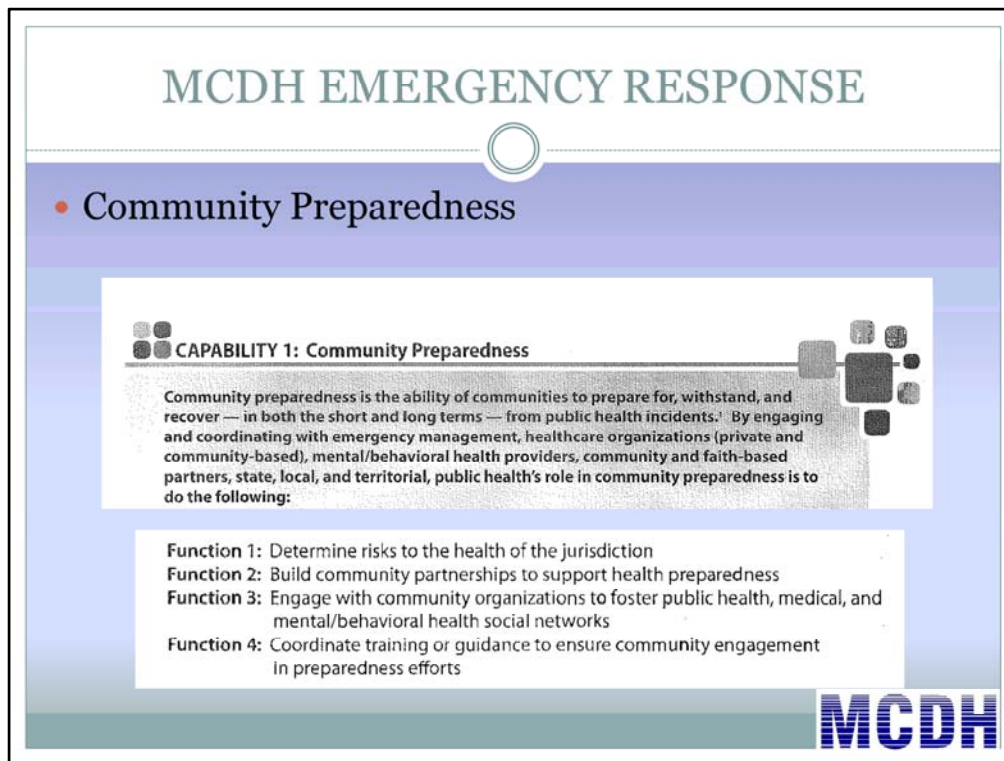
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Private businesses are also an important part of our planning partnership. In 2011 we hosted a workshop for McHenry County businesses and long term care centers to begin discussions on how they could become closed points of dispensing and provide emergency medication to their employees.



For the past several years, we have met quarterly with functional needs agencies throughout McHenry County to discuss planning issues of mutual concern. For example, the emergency response program has opened discussions about evacuation, resource sharing and closed PODs. Presentations have been offered by ARC, CHUG, emergency management, crisis to name a few.

Agencies who attend these meetings include the list above, as well as various other social service agencies who serve the fragile populations of McHenry County.



Because every disaster is local and because we know that there will be a period of time before outside help can arrive, it is vital that McHenry County be in a position to take care of itself in the aftermath of a disaster. This necessity for community preparedness is recognized across the country and at the federal level.

With the changing of the guard at the Federal Level, and as public health emergency response has matured as a discipline, the grant deliverables have become more sophisticated reaching into more areas – such as community preparedness.

An overarching goal of the ER program is that in addition to the partnerships I have spoken of, we reach further into the community to form new affiliations. As the funding pool in the emergency response discipline continues to shrink, and the requirements continue to become more challenging, the strength and depth of the partnerships we have in place will help McHenry County have a robust public health emergency



## MCDH EMERGENCY RESPONSE



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### Goals for this year:

MRC outreach campaign to recruit more volunteers – expand usage of heart age tool for community

Develop closed PODs both with private businesses and with functional needs organizations

Continue to provide community preparedness education – encourage people to have a kit, make a plan, know the facts

Continue to enhance our planning for a radiological event

Work with law enforcement to refine POD security plans

Conduct a large scale mcm exercise, incorporating all of our partners

Participate in the MCDH School Health Professional Seminar

Participate in regional Whole Community Conference, sponsored by the regional catastrophic planning committee

